



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:)
Guerra et al.) Group Art Unit: 2655
Application No. 09/802,493) Examiner: McFadden, Susan Iris
Filed: 03/09/2001) Atty. Docket No. BVOCPO20
For:) Date: January 28, 2005
SYSTEM, METHOD AND COMPUTER)
PROGRAM PRODUCT FOR LOOKING UP)
BUSINESS ADDRESSES AND DIRECTIONS)
BASED ON A VOICE DIAL-UP SESSION)

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being mailed as First Class Mail to the Commissioner of Patents, Alexandria, VA 22314-1450 on the above date.

Signed: _____

Erica L. Farlow

AMENDMENT A

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

Dear Sir:

In response to the office action mailed 08/19/2003, please enter the following amendments and remarks to the above mentioned patent application.

02/03/2005 RFEKADU1 00000046 09802493

01 FC:2453
02 FC:2202

750.00 DP
25.00 DP



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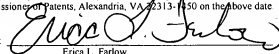
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Commissioner of Patents, Alexandria, VA 22313-1450 on the above date

Signed:


Erica L. Farlow

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	<u>21</u> -	<u>20</u>	<u>01</u>	X25 = \$ 25	OR	X50 = \$
INDEP CLAIMS	<u>03</u> -	<u>03</u>	<u>00</u>	X100 = \$	OR	X200 = \$0

[] Multiple Dependent Claim Present
and Fee Not Previously Paid

\$0

\$0

TOTAL

\$25.00

\$ _____



Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.



Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.



Enclosed is our Check No. 5249 in the amount of \$25.00 to cover the additional claim fee and/or extension of time fees.



If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. BVOCPO20). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
Zilka-Kotab, PC


Kevin J. Zilka
Registration No. 41,429

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